	PAIEN	on fee c re Decem	09/500639									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHE	R THAN ENTITY
FOR NUMBER FILED NUMBER EXTRA					r	RATE	FEE	٦	RATE	FEE		
B	BASIC FEE									OR	Section 18	
TOTAL CLAIMS			72	minus	20= 5			X\$ 9=		OR	X\$18=	90
IN	INDEPENDENT CLAIMS 5 minus 3 = : 3							X39=			X78=	
M	MULTIPLE DEPENDENT CLAIM PRESENT									OR		126
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=	<u> </u>	OR	<u> </u>	<u> </u>
								TOTAL		OR	TOTAL	934
Ŀ	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		REMAI AFTI AMEND	NING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
	Total	1.0C	)	Miņus	- 25	=		X\$ 9=		OR	X\$18=	
AME	Independent	1 4	05.14	Minus	5	= /		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-130=		OR	+260=	
		• • •					<u>_</u>	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)							AU	DIT. FEE	<u> </u>	<u> </u>	ADDIT. FEE	
AMENDMENT B		CLAH REMAIN AFTE AMENDI	VING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	**	=	7	<b>(\$ 9=</b>		OR	X\$18=	
ME	Independent	•		Minus '	111	-	1	K39=			X78=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-		· · ·	OR	7.10,-	
	,							130=		OR	+260=	
	•						ADE	TOTAL IT. FEE		OR	TOTAL ADDIT. FEE	· · · · · · · · · · · · · · · · · · ·
_	- Andrews (Control of the Control of	(Colum		Secretarism second	(Column 2)	(Column 3)			•			
		CLAIN REMAIN AFTE AMENDM	IING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	٠		Minus	**	=	Х	\$ 9= ·		OR	X\$18=	
	Independent	*		Minus	***	=	X	39=			X78=	
	HAST PRESE	NTATION (	OF MU	LTIPLE DEP	ENDENT CLAIM					OR		
- H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+260=	
H	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20; enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								لــــــــــــــــــــــــــــــــــــــ		TOTAL DDIT. FEE	•
7	he "Highest Num	ber Previous	sty Paid	For (Total or	Independent) is the	highest number	lound is	n the appr	opriate box	in colu	mn 1.	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number